C/007/013 Incoming ILUEIVED gol cc: Pete MAY 30 2008

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PRO	DUCEF	(724)	34	9 - :	130	ο,	Fax	(7	24)349-1446	THIS CERT	IFICATE IS	ISS	UED AS A MATTE	R C	F IN	FORMATION
Re	schi		Age								ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR						
92	2 Pł	il	adel	ph:	ia	St:	ree	∍t			ALTER THE	COVERAGE	AF	FORDED BY THE	POLI	CIES	BELOW.
Р.). E	ox	449												4.4		
	diar	ıa					P.	A 1	57	01	INSURERS AFFORDING COVERAGE				NAIC#		
INSURED											INSURER A: Federal Insurance Company						
			ican				,]	Inc.			INSURER B:						
37	5 Ca	rb	on A	vei	aue	9					INSURER C:						
_	_										INSURER D:						
Price UT 84501										01	INSURER E:						
COVERAGES THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING A REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERT. THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIAGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.															R MAY PERTAIN		
INSR LTR	R ADD'L R INSRD TYPE OF INSURANCE									POLICY NUMBER	POLICY EFFECTIVE POLICY EXPIRATION DATE (MM/DD/YY) DATE (MM/DD/YY)				LIMITS		
		GEN	IERAL L	IABIL	_ITY				3	37104410	06/01/2008	06/01/20		EACH OCCURRENCE		\$	1,000,000
		Х					$\overline{}$	IABILITY						DAMAGE TO RENTED PREMISES (Ea occurrent	ce)	\$	1,000,000
A			cı	LAIMS	S MA	DE [X	occu	R					MED EXP (Any one perso	ın)	\$	10,000
														PERSONAL & ADV INJUI	Υ Υ	\$	1,000,000
									.	·				GENERAL AGGREGATE		\$	3,000,000
		GEN				IMIT A RO- ECT	_	IES PEF 7	٦:					PRODUCTS - COMP/OP	AGG	\$	2,000,000
		AUT X	POLICY OMOBIL ANY AL	E LI			Х	LOC		73171037	06/01/2008	06/01/20	09	COMBINED SINGLE LIMI (Ea accident)	Т	\$	1,000,000
A			ALL OV			-								BODILY INJURY (Per person)		\$	
			HIRED NON-O		-	ITOS								BODILY INJURY (Per accident)		\$	
									1	·				PROPERTY DAMAGE (Per accident)		\$	
		GAF	AGE LI		TY									AUTO ONLY - EA ACCIDI	ENT	\$	
			ANY AL	JTO										ALITO ONLY:	ACC AGG		
		EXC	ESS/UM	BRE	LLA	LIABII	LITY							EACH OCCURRENCE		\$	
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	WOR	(EDS	RETEN	-					+					WC STATUL 1	OTH.	\$	
	EMPL	OYEF	COMPE S' LIAB	ILITY	,										땑	<u> </u>	
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?													E.L. EACH ACCIDENT	$\overline{}$	\$	
	If yes, describe under SPECIAL PROVISIONS below													E.L. DISEASE - EA EMPL			
	OTHE		10 11010	1100	CIOW				+					E.L. DISEASE - POLICY L	IMII	<u>\$</u>	
Gen Can	DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS General Liability Coverage is inclusive of XCU Coverage. Reference: Horse Canyon Mine MSHA ID# 42-00100 and Lila Canyon Mine MSHA ID#42-02241 Subsidence Coverage is included with \$500,000 property damage deductible per claim under the General Liability Policy.																
CEF	TIFIC	ATE	HOL	DEF	1						CANCELLATION						
											SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE						
	State of Utah										EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL XINDXXXXXXXXXX MAIL						

State of Utah
Division of Oil, Gas, and Mining
Attn: Pam Grubaugh-Littig
1594 West North Temple
Suite 1210
Salt Lake City, UT 84114-5801

AUTHORIZED REPRESENTATIVE

Karen Williams/KAREN

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IMPORTANT

If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

DISCLAIMER

The Certificate of Insurance on the reverse side of this form does not constitute a contract between the issuing insurer(s), authorized representative or producer, and the certificate holder, nor does it affirmatively or negatively amend, extend or alter the coverage afforded by the policies listed thereon.